## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09 691 896

		CLAIMS A	S FILED - PART   (Column 1)		(Column 2)			SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS				39		(Ocidinity 2)				OR		ENTITY
FOR						AN IMAGED EVERA			FEE	4	RATE	FEE
			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			39 minus 20=		19			X\$ 9=	171:-	OR	X\$18=	
INDEPENDENT CLAIMS			6 minus 3 =		. 3			X40=	120:-	OR	X80=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT				-		120, -			
• 11	the difference	in column 1 is	less than zero, enter		"O" in column 2		L	+135=	_	OR	+270=	
•						Joiumn 2		TOTAL	646:-	OR	TOTAL	
3/	8/04		MENDED - PART II								OTHER	
_	1	(Column 1) CLAIMS		(Colur				SMALL		OR 1 F	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total Independent	:31	Minus		39	=		X\$ 9=	-	OR	X\$18=	
		NTATION OF M	Minus	PENDENT	GAIM	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
					5		<u> </u>	TOTAL			TOTAL	
		(Column 1)		(Colun	nn 2)	(Column 3)	AL	DIT. FEE		J • · · · /	ADDIT. FEE	
AMENDMENT B	900	CLAIMS REMAINING		HIGH	EST				ADDI-	Г		4501
		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	••		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	•••		=		X40=		<b>-</b>	X80=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		-		<del></del>	OR	X00=	
							Ľ	135=		OR	+270=	
								TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
		(Column 1)		(Colum	ın 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA	F		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		(\$ 9=		<u>.</u>	X\$18=	165
	Independent	•	Minus	•••		=	-			OR    -		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		-	(40=		OR _	X80=	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								135=		OR	+270=	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "7."  ADDIT.										DR AC	TOTAL DDIT. FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												